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## *DEVELOPMENT OF A MEDICAL SUPPLY SET FOR CORPSMEN IN THE FIELD*

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# **DEVELOPMENT OF A MEDICAL SUPPLY SET FOR CORPSMEN IN THE FIELD**

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## **SUMMARY**

### **Background**

Fleet Marine Force corpsmen are the first medical responders to treat casualties during training exercises and in battle. To provide treatment corpsmen carry a bag of medical supplies called the Surgical Instrument and Supply Set, which is often referred to as a "Unit One." The Unit One was last reviewed in 1966. Twenty years of new technology leaves the supplies and the bag they are carried in severely outdated.

### **Objective**

The purpose of this investigation is to develop a medical supply set for field corpsmen. The medical supplies are linked to specific medical tasks conducted in the field.

### **Approach**

Using the Naval Health Research Center medical supply model, a list of supplies was generated for tasks conducted in the field. This list of supplies was compared to the Battalion Aid Station (BAS) Authorized Medical Allowance Lists 635/636 to ensure standardization and compatibility. Then subject matter experts with combat casualty care experience rated each item according to whether it would be carried in the bag, would be taken as needed from the BAS, or had no clinical requirement.

### **Results**

The review of medical supplies generated an updated list of supplies to be carried into the field and a list of items that will be pulled from the BAS when needed. Items without a clinical requirement were not included. A clinical requirement was established for each item by attaching it to one or more of the field tasks performed by corpsmen, thereby producing an audit trail for each supply item.

### **Conclusion**

The new medical module for field corpsmen will allow them to carry more items. The proposed list of items is a refined and updated set of supplies that was fielded in October 1998. Making these improved supplies available to the corpsmen will also greatly improve treatment capability and, as technology and need change, replacements, additions, and deletions can easily be made. Training can also be enhanced by using the defined treatment tasks and supplies attached to them.

# **DEVELOPMENT OF A MEDICAL SUPPLY SET FOR CORPSMEN IN THE FIELD**

## **INTRODUCTION**

New and evolving types of Marine Corps missions are fast paced and require a high degree of mobility and a wide geographic dispersion of units (Headquarters Marine Corps, 1996). Immediate medical care is performed primarily by corpsmen associated with combat units—corpsmen known as Fleet Marine Force (FMF) Field Medical Service Corpsmen. The FMF corpsmen's treatment tasks include the ability to control hemorrhage by bandaging and compressing open wounds, to apply splints to broken bones, to stabilize spinal injuries, to initiate circulatory volume replacement with intravenous fluids, and to treat acute pain with analgesics.

Corpsmen perform initial triage of patients by observation and by use of the sparse equipment set available to them. Diagnostic equipment is usually limited to a stethoscope, sphygmomanometer, and a flashlight. FMF corpsmen are the first medical responders to treat casualties during training exercises and in battle. To provide treatment, corpsmen have had to rely on a bag of medical supplies called the Surgical Instrument and Supply Set, which is often referred to as the "Unit One."

The Unit One consists of medical supplies in a bag designed for corpsmen to carry into the field. The bag is divided into three sections. When filled with the medical supplies, it is bulky and cumbersome, and it does not allow for free use of both hands. The sections cannot be rearranged to suit individual requirements (U.S. Army Medical Department Center and School, 1993).

The last documented review of the Unit One was in 1966. Since that time, the training and skills acquired by corpsmen have greatly increased, missions have changed, and medical supplies have been improved. Consequently, corpsmen rarely carry the Unit One anymore; instead, they carry bags made at home, commercially made bags, or bags provided by other services, with their own configuration of medical supplies.

In the past, medical supplies have been "updated" based on want rather than on need. Usually this consists of adding more and more new items without much regard for deleting old ones; items of new technology are put in the system, while antiquated items are not addressed and remain in the system. The result is a growing list of items—many of which could not or should not be used because they are outdated or are of no clinical use. The Unit One has been one of those "overlooked" items.

Clearly, the current system needs some refinement and the Marine Corps began reviewing it. The Mission Need Statement for the Marine Enhancement Program (MEP) focuses on the acquisition of equipment items that would benefit Marines by reducing weight load, increasing survivability, and enhancing safety (U.S. Marine Corps, 1993; U.S. Marine Corps, 1994). In response to MEP, many equipment items have been and are being addressed. Also, the need for improved casualty treatment, which includes injury identification, casualty care, and casualty support, has been established (U.S. Marine Corps, 1996).

The Marine Corps and the Army have conducted many projects to develop a medical module system that complies with MEP requirements. The Army completed an Initial Operational Test and Evaluation (IOTE) to assess the effectiveness, comfort, and safest means of carrying medical supplies (Craig, 1996). The four phases of the IOTE were conducted during normal training cycles and day-to-day unit mission activities, including day and night operations.

At the same time, the U.S. Army Special Operations Command conducted an evaluation during normal training missions (USASOC, 1996). Data were collected using questionnaires, subject matter experts (SMEs), and participant comments. The Marine Corps also conducted operational testing of the new system; it was reported that the data and comments paralleled those obtained during Army testing (U.S. Army Test and Evaluation Command, 1996). Results showed the new system to be effective, comfortable, and safe. Users were especially satisfied with the ability to configure the pouches on the bag as the mission required.

Both the Army and Marine Corps have agreed to use the medical module that will completely replace the bag of the Unit One. The pouches can be removed or attached to just about any part of the bag, which allows for individual preference and mission needs. It is comfortable because of the use of mesh material and multiple adjustable straps.

The Marine Corps and Army development of the medical module has proceeded with fielding in October 1998. The Army will start using the medical module with its Combat Medic Vest and the Marine Corps will use the medical module as a stand-alone item. The medical module is a vast improvement over the Unit One bag, however, an updated list of medical supplies for field corpsmen had not been developed. The Naval Health Research Center (NHRC) has been successfully updating the Marine Corps' Authorized Medical Allowance Lists (AMALs) (Galarneau, Konoske, Emens-Hesslink, & Pang, 1998a; Galarneau, Konoske, Emens-Hesslink, Pang, & Gauker, 1997a; Galarneau, Mahoney, Konoske, & Emens-Hesslink, 1997b; Galarneau, Pang, Konoske, & Gauker, 1998b). Therefore, NHRC was requested to apply their approach in updating the medical supply set that will be carried in the new medical module by field corpsmen.

## METHOD

### Medical Supply Model

NHRC developed a model for estimating medical materiel requirements at forward areas of care. The approach used to develop the model was similar to that used to configure the supplies for the Deployable Medical Systems (DEPMEDS) facilities. Briefly, the medical tasks required to treat patients with specific patient conditions (PCs) were identified (Defense Medical Standardization Board, 1996), and the supplies and equipment required for each task were determined. SMEs reviewed treatment briefs, tasks, supplies, and equipment and examined their usefulness for Marine Corps forward treatment facilities. The result of this effort is a model in which the supply stream establishes a clinical requirement for each item used to support forward medical care.

Then, by using the Army's patient generating model, PATGEN (U.S. Army Medical Department Center and School), the number of PCs seen at each area of care could be projected by user-defined input. This approach has been used to configure the AMALs used by the FMF. When the Battalion Aid Station (BAS), lab, x-ray, and operating room AMALs were reconfigured, results showed substantial reductions (approximately 30%) in the number of items required, in weight, and in cube of the proposed AMALs when compared with the current Marine Corps AMALs. By establishing the clinical requirement for each item pushed forward, the NHRC model was able to reduce the logistical burden carried by Marine Corps units.

This approach also produces an audit trail for each item because only items that can be clinically related to a treatment task conducted in theater are considered for inclusion in the

AMALs. Further, a computer program was developed to estimate supplies and equipment based on a given patient stream distribution. This allows for current AMAL configurations to be revised using information such as type of anticipated conflict, the expected duration of the conflict, and changes in medical doctrine. A detailed description of the development of this model has been previously published (Galarneau et al., 1997a; Galarneau et al., 1997b; Galarneau et al., 1998a; Galarneau et al., 1998b).

### Participants

Eleven SMEs—staff members at the Field Medical Services School (FMSS), Camp Pendleton, Oceanside, CA—participated in the study. The SMEs were corpsmen experienced in combat casualty care and were instructors of the FMSS Fleet Marine Force Corpsmen Training Course. Their ranks ranged from HM2 to HMC. Table 1 shows the SMEs' various specialties. One SME listed only one specialty; all others listed two specialties.

**Table 1. SME Specialties**

Code	Specialty	Number
8403	Special Operations Independent Duty Corpsman	1
8404	Fleet Marine Force Field Medical Service Corpsman	9
8425	Independent Duty Corpsman	1
8427	Fleet Marine Force Reconnaissance Corpsman	1
8432	Preventive Medicine Corpsman	1
9502	Instructor	8

### Procedures

Using the process of the NHRC medical supply model, a list of medical supplies needed for medical tasks performed in the field was generated. Table 2 provides a list of tasks conducted by corpsmen in the field. The generated list of medical supplies was then compared with the BAS AMALs 635/636 to ensure compatibility and standardization. The SMEs then reviewed the AMAL-compatible list.

SMEs were asked to examine the generated list of medical supplies. They first reviewed the battlefield/BAS medical supplies that had been identified previously by NHRC (Galarneau et al., 1997a). Then the supplies were attached to medical tasks performed in the field. For each task, participants rated each supply item as follows: (1) to be carried in the bag, (2) to be taken as needed from the BAS, or (3) to be deleted because of no clinical requirement. Another criterion was that a basic corpsman just out of Field Medical Services School would be skilled enough to use each of the items.

**Table 2. Medical Tasks Performed in the Field by FMF Corpsmen**

<b>Task #</b>	<b>Task Name</b>	<b>Task #</b>	<b>Task Name</b>
A2	Remove Casualty From Danger*	096	Apply Sling
A6	Apply Tourniquet	098	Apply Splint, Immobilize Injury
A8	Clear Respiratory Airway*	103	Circulation Check
A10	Place in Coma Position*	108	Minor Surgical Procedure
A12	Occlude Sucking Chest Wound	121	Eye Irrigation
A30	Wet/Cold Injury Therapy	123	Eye Care (Dressings/Eye Patch)
001	Triage	125	Sponge/Hyperthermia Treatment
002	Assessment and Evaluation of Patient Status	126	Seizure Care/Precautions
006	Establish Adequate Airway	127	Patient Restraint (Gauze, Mitts, Ties)
010	Neurological Assessment	142	Order/Document Appropriate Meds/Treatment
011	Stabilize Neck/Spine	145	Administer Appropriate Medication
018	Recognize and Respond to Hemorrhage	248	Force Fluids*
024	Vital Signs	278	Arrange for Patient Evacuation*
049	Start/Change IV Infusion Site	279	Arrange and Document Returns to Duty*
050	IV Infusion, Change Bottle (Maintain)	744	Apply Velpeau Dressing
070	Bowel Sounds Assessment	Z014	Intubation
086	Clean and Dress Wound	Z027	Cardiac Arrest Resuscitation*
090	Compresses (Soaks)	Z083	Expose Patient for Exam
092	Apply Ace Bandage	Z277	Prepare for Evacuation Ground/Air*
093	Extremity Elevation*	ZZ01	Induce Vomiting

\*No supplies needed for this task.

## RESULTS AND DISCUSSION

The objective of this project was to develop an improved medical supply set for corpsmen in the field. The review conducted by the SMEs generated two lists of medical supply items for field corpsmen: the items that would be carried initially in the new medical supply module and the items that could be pulled as needed from the BAS AMALs 635/636. Items with no clinical requirement were excluded from the proposed list. The proposed items were linked to the medical tasks for which they are needed. See Appendix A for a list of the supplies required to perform each field medical task. The result is a refined and updated supply set to suit corpsmen's needs.

The development of the new medical module for field corpsmen will allow for a significant increase in the amount of items they can carry and will, therefore, give them greater treatment capability. Table 3 shows the current list of medical supplies carried in the Unit One. The number of items carried by the corpsmen was increased from the original 20 items in the Unit One to 48 items in the new medical module. Table 4 presents the proposed list of supply items that would be carried in the bag. Six items from the Unit One were kept in the proposed supply list: two types of bandages (muslin and adhesive), a first aid dressing, a pair of bandage scissors, a universal splint, and the surgical instrument set.



**Table 3: The Current Unit One**

NSN	Nomenclature	Quantity
6510002035000	ADHESIVE TAPE SURGICAL 3" X 5 YD	1 EA
6515009582232	AIRWAY PHARYNGEAL BERMAN CHILD 80 MM	1 EA
6515012331913	AIRWAY PHARYNGEAL GUEDEL SZ 4 90 MM	1 EA
6505001009985	ASPIRIN TABLETS	2 BT
6505009269083	ATROPINE INJ AQUEOUS .7 ML SYRINGE W/NEEDLE	10 EA
6510009137909	BANDAGE ADHESIVE FLESH	36 EA
6510002003185	BANDAGE GAUZE COMPRESSED CAMOUFLAGE	2 EA
6510002011755	BANDAGE MUSLIN CAMOUFLAGE	2 EA
6545009129870	CASE SURGICAL INSTRUMENT AND SUPPLY SET	1 EA
6510002017430	DRESSING FIRST AID FIELD BROWN CAMOUFLAGE	2 EA
6510001594883	DRESSING FIRST AID FIELD CAMOUFLAGE	8 EA
7520001648950	PENCIL MECHANICAL BLACK BARREL AUTO	1 DZ
8315007878000	PIN SAFETY BRASS SZ 2 1.5" LONG	1 BX
6505009143593	POVIDONE-IODINE TOPICAL SOL	3 BT
6515009357138	SCISSORS BANDAGE 7.25" ANGLE BLUNT PTS CRS	1 EA
6515012254681	SPLINT UNIVERSAL STRUCTURAL ALUMINUM	1 PG
6545009577650	SURGICAL INSTRUMENT SET MINOR SURGERY	1 EA
6505005824737	TETRACAINE HCL OPHTH SOL	2 EA
6510001491405	THERMOMETER CLINICAL HUMAN ORAL MERCURY	1 EA
6515003830565	TOURNIQUET NONPNEUMATIC CAMOUFLAGE	1 EA

Note: NSN=National Stock Number; The NSN for the Unit One is 6545-00-927-4960.

The other 42 items were added to update the supply set and to provide the capability to execute the medical field tasks the corpsmen are required to perform. Many of the added items have not been previously available to field corpsmen—items like an otoscope/ophthalmoscope set and a laryngoscope. Also, because the items carried in the medical module are compatible with the BAS AMALs 635/636, they will be able to restock their bags at the BAS.

**Table 4: Proposed Supplies to be Carried in the Medical Module**

NSN	Nomenclature	Quantity
6515011676637	AIRWAY NASOPHARYNGEAL ROBERTAZZI 30 FR	1 EA
6515011649637	AIRWAY PHARYNGEAL 100MM AIRWAY/CUTAWAY 30 FR	1 EA
6515009582232	AIRWAY PHARYNGEAL 80MM AIRWAY/CUTAWAY 30 FR	1 EA
6505001060875	AMMONIA INHALANT SOL AROMATIC .333 CC AMP	10 EA
<b>6510009137909</b>	<b>BANDAGE ADHESIVE FLESH</b>	10 EA
6510001055807	BANDAGE ELASTIC COBAN™ BROWN	2 EA
6510009355822	BANDAGE ELASTIC ROLLED	4 EA
6510000583047	BANDAGE KERLIX® ROLL	6-8 RL
<b>6510002011755</b>	<b>BANDAGE MUSLIN CAMOUFLAGE</b>	10-12 EA
6515012297741	BLADE LARYNGOSCOPE MACINTOSH SIZE 4	1 EA
6515011256615	BLADE LARYNGOSCOPE MILLER SIZE 3	1 EA
6515013405429	CATHETER & NEEDLE UNIT IV 14 GA	5 EA
6515013373681	CATHETER & NEEDLE UNIT IV 18 GA	5 EA
6505001168350	DIPHENHYDRAMINE HYDROCHLORIDE CAPS 50 MG	1 BT
6510012435894	DRESSING BURN 4" X 6" SATURATED W/ WATER GEL	5 EA
6510014081920	DRESSING CHEST WOUND SEAL	4 EA
<b>6510002017430</b>	<b>DRESSING FIRST AID FIELD BROWN CAMOUFLAGE</b>	4 EA
6510002017425	DRESSING FIRST AID FIELD CAMOUFLAGE	2 EA
6510000835573	DRESSING FIRST AID FIELD WHITE ABSORBENT	6 EA
8105010990355	ENVELOPE DRUG DISPENSING PLASTIC W/PANEL	10 EA
6505012385634	EPINEPHRINE SYRINGE NEEDLE UNIT 1:1000	1 EA
NSN PENDING	FIELD MEDICAL CARD DD FORM 1380	1 BK
6515011498842	GLOVES SURGEONS GEN SURG SZ 8 RUBBER	5 PR
6515011050614	INTRAVENOUS INJECTION SET 12 COMP STERILE	3 SE
6515011398384	LARYNGOSCOPE HANDLE LIGHTWEIGHT	1 EA
NSN PENDING	OTOSCOPE/OPHTHALMOSCOPE BASIC EENT SET W/LIGHT	1 SE
6510007863736	PAD ISOPROPYL ALCOHOL IMPREG NONWOVEN	16 EA
6510005596130	PAD POST-SURGICAL OBSTETRICAL SUPER SIZE	2-3 EA
7520009357136	PEN BALLPOINT RETRACTABLE MED PT BLACK	1 EA
6505013306267	RINGER'S INJECTION LACTATED USP 1000 ML BAG	3 EA
<b>6515009357138</b>	<b>SCISSORS BANDAGE 7.25" ANGLE BLUNT PTS CRS</b>	2 EA
8520013535671	SKIN CLEANSER 60% ETHYL ALCOHOL NO RINSE	1 BT
6515010394884	SPHYGMOMANOMETER ANEROID 300 MM MAX CAL	1 EA
6515001686894	SPLINT FINGER ALUMINUM EITHER HAND	1-3 EA
<b>6515012254681</b>	<b>SPLINT UNIVERSAL STRUCTURAL ALUMINUM</b>	3-4 EA
6510007219808	SPONGE SURGICAL CELLULOSE COTTON GAUZE	4-6 EA
6515013146694	STETHOSCOPE COMBINATION LITTMAN CLASSIC II	1 EA
6515013948327	STYLET TRACHEAL TUBE PLASTIC STERILE	2 EA
6515013701693	SUPPORT CERVICAL LARGE 16-18" PHILLY	1 EA
6515013701691	SUPPORT CERVICAL MEDIUM 13-15" PHILLY	1 EA
<b>6545009577650</b>	<b>SURGICAL INSTRUMENT SET MINOR SURGERY</b>	1 SE
6515007540412	SYRINGE HYPODERMIC GP 10-12 ML LUER SLIP	2 EA
6510009268884	TAPE ADHESIVE SURGICAL POROUS WOVEN 3"	1 RL
6515001491407	THERMOMETER CLINICAL HUMAN RECTAL	1 EA
6515013753244	THERMOMETER CLINICAL HUMAN SUBNORMAL	1 EA
6515013851697	TUBE DRAINAGE SURG PENROSE AMBER RUBBER	3-4 EA
6515001050744	TUBE ENDOTRACHEAL MURPHY E12 W/CUFF	2 EA
6515010369034	TUBE ENDOTRACHEAL RADIOPAQUE MURPHY	2 EA

Note: Items in bold are from the original Unit One (Table 3).

Along with an increase in the number of supplies they carry in the medical module, corpsmen will also have an additional 24 items available to them at the BAS. These items are listed in Table 5. These items include several medications (i.e., pseudoephedrine hydrochloride tablets) and other items (i.e., eye shield) that are important but not necessary to save life and limb in the field. Two items (diazepam and morphine) are controlled substances that have to be dispensed by the General Medical Officer to corpsmen as needed. The corpsmen will have the ability to carry the BAS items in their bags as their missions require. It is important to note that the amounts of these 24 items stocked in the BAS AMALs 635/636 have been increased to account for the field corpsmen's utilization of these items. By having additional items at the BAS, corpsmen will not have to carry all of these items all of the time, and yet they will still have a greater number of medical supplies available to them when they are needed.

**Table 5: Supplies Taken From the BAS as Needed**

NSN	Nomenclature
6505009857301	ACETAMINOPHEN TABLETS .325 GM
6505008899034	BISACODYL TABLETS USP 5 MG FILM ENTERIC 1000/BT
6505012448010	BISMUTH SUBSALICYLATE TABLETS 262 MG 42/PKG
6505014213787	CETYLPYRIDINIUM CHLOR & BENZOCAINE LOZ
6515003245500	DEPRESSOR TONGUE WOOD 6" X .75"X .062" STRAIGHT
6505001375891	DIAZEPAM INJ USP 5 MG/ML 2 ML SYRINGE /NEEDLE*
6505012149062	IBUPROFEN TABLETS USP 800 MG 500/BT
6505009269197	IPECAC SYRUP 7% 30 ML
6505010666568	LOPERAMIDE HYDROCHLORIDE CAPS USP 2 MG 100/BT
6505011561844	MAGNESIA ALUMINA HYDROX SIMETHICONE TABS 50/BT
6505012362147	MICONAZOLE NITRATE ANTIFUNGAL TREATMENT KIT
6505013025530	MORPHINE SULFATE INJ USP 10 MG AUTO INJECTOR*
6505008694177	OXYMETAZOLINE HYDROCHLORIDE NASAL SOLUTION .05%
6530001334299	PAD COOLING CHEMICAL PLASTIC FLEXIBLE PACK
6530013171131	PAD HEATING CHEMICAL PLAST CHEM REACTION 110°F
6505009617486	POLYVINYL ALCOHOL OPTHALMIC SOL ARTIFICIAL TEARS
6505009582366	PSEUDOEPHEDRINE HYDROCHLORIDE TABLETS USP 60 MG
6515006639801	SHIELD EYE SURGICAL FOX SINGLE CONSTR
6505013306269	SODIUM CHLORIDE INJ 1000 ML BAG
6515003721200	SPLINT WOOD BASSWOOD OVERALL
6515012899839	SYRINGE IRRIGATING TOOMEY PISTON 60 CC
6510002036010	TAPE ADHESIVE SURGICAL MOLESKIN 12" X 5 YD
6510009268882	TAPE ADHESIVE SURGICAL POROUS WOVEN 1"
6505009262241	TOLNAFTATE TOPICAL SOLUTION USP 1% 10 ML
6530001101854	TOWEL PACK SURGICAL BLUE/GRAY OR GREEN STER

\* Controlled substance—dispensed by General Medical Officer at the BAS.

Most of the items contained in the Unit One (14 out of 20 items in total) were not proposed for inclusion in the new supply set. SMEs did not include these items for many reasons: some items were replaced with updated items, some had no clinical requirement, and others were redundant. One example is the outdated gauze bandage replaced by the highly regarded Kerlix® bandage. The tourniquet was deleted because other items could be used instead (e.g., Kerlix® or a belt). The safety pins are not needed because the bandages in the proposed list

come with their own fasteners. All in all, these deleted items would be of no use to the corpsmen, and if kept in the supply list, would just add more bulk to what they already have to carry.

## CONCLUSION

In the past, medical supplies have been "updated" based on personal preference. This consisted of adding new items without much regard for deleting old items. When old items were deleted, associated items were frequently left in the supply set. An example would be leaving in the needles used for a specific syringe that was deleted. The result was a massive list of items—many of which could not or should not be used. This, of course, affected logistical issues such as the physical movement of these weighty supplies.

The NHRC model addresses this problem by linking each item carried by the corpsmen to a medical task performed in the field. If an item is outdated or is not needed to complete one of the tasks, then it is not included in the proposed list of supplies. The assignment of medical supplies to each of the field tasks establishes the clinical requirement for each supply item, thereby producing an audit trail. As technology and need change, replacements, additions, and deletions of items can be easily made.

An important consideration of NHRC's supply configuration process is the impact it will have on future endeavors. Because the supply database links the medical supplies with clinical requirements, supply estimates for any scenario or capability can be generated. As medical technology and doctrine change, the supply set can be modified to keep corpsmen current. The NHRC medical supply model has many applications.

Corpsmen who have been presented the proposed list of carried items were enthusiastic about the increase in their ability to perform their life-saving duties. Because the field tasks and the supplies that go with them have been defined, training will also be enhanced for the corpsmen. Furthermore, with this proposed list of items being those that corpsmen are already trained to use, they will not need additional training; therefore, there will not be a deficit in the corpsmen's current abilities.

The reason for conducting this project was to improve the treatment and life-saving capability of corpsmen in the field. By using the NHRC supply model to update the medical supplies, the corpsmen will have the types and amounts of supplies they need, and they will have everything they need from the beginning. They will be able to pack these supplies as their missions require. Fielding of the medical module that includes the updated supplies began in October 1998. Consequently, corpsmen will not only have a way to carry their medical supplies, but they will also have the supplies they need to save lives.

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## APPENDIX A: SUPPLY REQUIREMENTS FOR FIELD MEDICAL TASKS

**Notes:**

A check mark indicates whether the item is initially carried in the bag or acquired from the BAS as needed.

"Um" is unit of measure: RL=roll, EA=each, PR=pair, ML=milliliters, YD=yard, BT=bottle, SE=set, TB=tablet, KT=kit, CP=capsule, LZ=lozenge.

### Task: A6 Apply Tourniquet

Bag	BAS	Nomenclature	Amount	Um
✓		Bandage Kerlix® Roll <sup>1</sup>	1	RL
✓		Bandage Elastic Coban™ Brown <sup>1</sup>	1	RL

<sup>1</sup>Either item can be used as a tourniquet.

### Task: A12 Occlude Sucking Chest Wound

Bag	BAS	Nomenclature	Amount	Um
✓		Dressing Chest Wound Seal	1	EA

### Task: A30 Wet/Cold Injury Therapy

Bag	BAS	Nomenclature	Amount	Um
	✓	Pad Heating Chemical Plast Chem Reaction 110°F	2	EA
	✓	Towel Pack Surgical Blue/Gray or Green Ster	1	EA

### Task: 001 Triage

Bag	BAS	Nomenclature	Amount	Um
✓		Field Medical Card DD Form 1380	1	EA

## APPENDIX A: SUPPLY REQUIREMENTS FOR FIELD MEDICAL TASKS (CONT.)

### Task: 002 Assessment and Evaluation of Patient Status<sup>1</sup>

Bag	BAS	Nomenclature	Amount <sup>2</sup>	Um
✓		Otoscope/ophthalmoscope Basic EENT Set W/Light	1	EA
	✓	Depressor Tongue Wood 6" x .75" x .062" Straight	2	EA
✓		Gloves Surgeons Gen Surg Sz 8 Rubber	1	PR

<sup>1</sup> The supplies used for this task vary depending on the Patient Condition.

<sup>2</sup> The amounts cited vary depending on the Patient Condition.

### Task: 006 Establish Adequate Airway<sup>1</sup>

Bag	BAS	Nomenclature	Amount <sup>2</sup>	Um
✓		Airway Nasopharyngeal Robertazzi 30FR	1	EA
✓		Airway Pharyngeal 100mm Airway/CutAway 30FR	1	EA
✓		Airway Pharyngeal 80mm Airway/CutAway 30FR	1	EA

<sup>1</sup> The supplies used for this task vary depending on the Patient Condition.

<sup>2</sup> The amounts cited vary depending on the Patient Condition.

### Task: 010 Neurological Assessment

Bag	BAS	Nomenclature	Amount	Um
✓		Otoscope/ophthalmoscope Basic EENT Set w/Light	1	EA

### Task: 011 Stabilize Neck<sup>1</sup>

Bag	BAS	Nomenclature	Amount <sup>2</sup>	Um
✓		Support Cervical Large 16-18" Philly	1	EA
✓		Support Cervical Medium 13-15" Philly	1	EA

<sup>1</sup> The supplies used for this task vary depending on the Patient Condition.

<sup>2</sup> The amounts cited vary depending on the Patient Condition.



## APPENDIX A: SUPPLY REQUIREMENTS FOR FIELD MEDICAL TASKS (CONT.)

### Task: 018 Recognize and Respond to Hemorrhage<sup>1</sup>

Bag	BAS	Nomenclature	Amount <sup>2</sup>	Um
✓		Bandage Muslin Camouflage	1-2	EA
✓		Bandage Elastic Coban™ Brown <sup>3</sup>	1	RL
✓		Bandage Elastic Rolled	1-2	RL
✓		Bandage Kerlix® Roll <sup>3</sup>	1-5	RL
✓		Dressing Burn 4" x 6" Saturated W/Water Gel	1-3	EA
✓		Dressing Chest Wound Seal	1	EA
✓		Dressing First Aid Field Brown Camouflage	1-3	EA
✓		Dressing First Aid Field Camouflage	1-2	EA
✓		Dressing First Aid Field White Absorbent	1-2	EA
✓		Pad Post-Surgical Obstetrical Super Size	1-2	EA
✓		Sponge Surgical Cellulose Cotton Gauze	2-8	EA
✓		Tape Adhesive Surgical Porous Woven 3"	.5	RL

<sup>1</sup> The supplies used for this task vary depending on the Patient Condition.

<sup>2</sup> The amounts cited vary depending on the Patient Condition.

<sup>3</sup> This item can also be used as a tourniquet.

### Task: 024 Vital Signs<sup>1</sup>

Bag	BAS	Nomenclature	Amount	Um
✓		Sphygmomanometer Aneroid 300mm Max Cal	1	EA
✓		Stethoscope Combination Littman Classic II	1	EA
✓		Thermometer Clinical Human Rectal	1	EA
✓		Thermometer Clinical Human Subnormal	1	EA

<sup>1</sup> The supplies used for this task vary depending on the Patient Condition.

## APPENDIX A: SUPPLY REQUIREMENTS FOR FIELD MEDICAL TASKS (CONT.)

### Task: 049 Start/Change IV Infusion Site<sup>1</sup>

Bag	BAS	Nomenclature	Amount <sup>2</sup>	Um
✓		Catheter & Needle Unit IV 18GA	1-2	EA
✓		Catheter & Needle Unit IV 14GA	1-2	EA
✓		Intravenous Injection Set 12 Comp Sterile	1-2	EA
✓		Pad Isopropyl Alcohol Impreg Nonwoven	1-2	EA
	✓	Splint Wood Basswood Overall	1-2	EA
	✓	Tape Adhesive Surgical Porous Woven 1"	.5	RL
✓		Tape Adhesive Surgical Porous Woven 3"	.5	RL
✓		Tube Drainage Surg Penrose Amber Rubber	1	EA

<sup>1</sup> The supplies used for this task vary on the Patient Condition.

<sup>2</sup> The amounts cited vary depending on the Patient Condition.

### Task: 050 IV Infusion, Change Bottle (Maintain)<sup>1</sup>

Bag	BAS	Nomenclature	Amount <sup>2</sup>	Um
✓		Ringer's Injection Lactated USP 1000 ML Bag	1-3	EA

<sup>1</sup> The supplies used for this task vary depending on the Patient Condition.

<sup>2</sup> The amounts cited vary depending on the Patient Condition

### Task: 070 Bowel Sounds Assessment

Bag	BAS	Nomenclature	Amount	Um
✓		Stethoscope Combination Littman Classic II	1	EA

## APPENDIX A: SUPPLY REQUIREMENTS FOR FIELD MEDICAL TASKS (CONT.)

### Task: 086 Clean and Dress Wound<sup>1</sup>

Bag	BAS	Nomenclature	Amount <sup>2</sup>	Um
✓		Bandage Adhesive Flesh	1-4	EA
✓		Bandage Kerlix® Roll	1-4	RL
✓		Dressing Burn 4" x 6" Saturated W/Water Gel	2-4	EA
✓		Dressing Chest Wound Seal	1	EA
✓		Dressing First Aid Field White Absorbent	1-2	EA
	✓	Sodium Chloride Inj 1000 ML Bag	250	ML
✓		Sponge Surgical Cellulose Cotton Gauze	2-4	EA
	✓	Syringe Irrigating Toomey Piston 60 cc	1	EA
	✓	Tape Adhesive Surgical Moleskin 12" x 5 YD	.10	YD
✓		Tape Adhesive Surgical Porous Woven 3"	.5	RL

<sup>1</sup> The supplies used for this task vary depending on the Patient Condition.

<sup>2</sup> The amounts cited vary depending on the Patient Condition.

### Task: 090 Compresses (Soaks)

Bag	BAS	Nomenclature	Amount	Um
	✓	Towel Pack Surgical Blue/Gray or Green Ster	3	EA

### Task: 092 Apply Ace Bandage

Bag	BAS	Nomenclature	Amount <sup>1</sup>	Um
✓		Bandage Elastic Coban™ Brown	1	RL

<sup>1</sup>The amount cited varies depending on the Patient Condition.

### Task: 096 Apply Sling

Bag	BAS	Nomenclature	Amount	Um
✓		Bandage Muslin Camouflage	1	EA

## APPENDIX A: SUPPLY REQUIREMENTS FOR FIELD MEDICAL TASKS (CONT.)

### Task: 098 Apply Splint, Immobilize Injury<sup>1</sup>

Bag	BAS	Nomenclature	Amount <sup>2</sup>	Um
✓		Bandage Elastic Coban™ Brown	1-2	RL
✓		Bandage Kerlix® Roll	1-2	RL
✓		Splint Finger Aluminum Either Hand	1	EA
✓		Splint Universal Structural Aluminum	1-2	EA
	✓	Tape Adhesive Surgical Porous Woven 1"	.5	RL
✓		Tape Adhesive Surgical Porous Woven 3"	.5	RL

<sup>1</sup> The supplies used for this task vary depending on the Patient Condition.

<sup>2</sup> The amounts cited vary depending on the Patient Condition.

### Task: 103 Circulation Check

Bag	BAS	Nomenclature	Amount	Um
✓		Stethoscope Combination Littman Classic II	1	EA

### Task: 108 Minor Surgical Procedure

Bag	BAS	Nomenclature	Amount	Um
✓		Bandage Kerlix® Roll	1-2	RL
✓		Gloves Surgeons Gen Surg SZ 8 Rubber	1	PR
✓		Pad Isopropyl Alcohol Impreg Nonwoven	2	EA
✓		Skin Cleanser 60% Ethyl Alcohol No Rinse	1	BT
✓		Sponge Surgical Cellulose Cotton Gauze	4	EA
✓		Surgical Instrument Set Minor Surgery	1	SE
	✓	Tape Adhesive Surgical Porous Woven 1"	.5	RL

## APPENDIX A: SUPPLY REQUIREMENTS FOR FIELD MEDICAL TASKS (CONT.)

### Task: 121 Eye Irrigation

Bag	BAS	Nomenclature	Amount	Um
✓		Catheter & Needle Unit IV 18GA	1	EA
	✓	Sodium Chloride Inj 1000 ML Bag	500	ML
✓		Sponge Surgical Cellulose Cotton Gauze	2-4	EA
	✓	Syringe Irrigating Toomey Piston 60 cc	1	EA

### Task: 123 Eye Care (Dressings/Eye Patch)

Bag	BAS	Nomenclature	Amount	Um
✓		Tape Adhesive Surgical Porous Woven 3"	.5	RL
	✓	Shield Eye Surgical Fox Single Constr	2	EA
✓		Sponge Surgical Cellulose Cotton Gauze	4	EA

### Task: 125 Sponge/Hyperthermia Treatment

Bag	BAS	Nomenclature	Amount	Um
	✓	Pad Cooling Chemical Plastic Flexible Pack	2	EA
	✓	Towel Pack Surgical Blue/Gray or Green Ster	3	EA

### Task: 126 Seizure Care/Precautions

Bag	BAS	Nomenclature	Amount	Um
✓		Bandage Kerlix® Roll	3	RL

### Task: 127 Patient Restraint (Gauze, Mitts, Ties)

Bag	BAS	Nomenclature	Amount	Um
✓		Bandage Kerlix® Roll	3	RL

## APPENDIX A: SUPPLY REQUIREMENTS FOR FIELD MEDICAL TASKS (CONT.)

### Task: 142 Order/Document Appropriate Meds/Treatment

Bag	BAS	Nomenclature	Amount	Um
✓		Field Medical Card DD Form 1380	1	EA
✓		Pen Ballpoint Retractable Med Pt Black	1	EA

### Task: 145 Administer Appropriate Medication<sup>1</sup>

Bag	BAS	Nomenclature	Amount <sup>2</sup>	Um
	✓	Acetaminophen Tablets .325 GM	10-30	TB
✓		Ammonia Inhalant Sol Aromatic .333 cc Amp	1	EA
✓		Bandage Adhesive Flesh	1-2	EA
	✓	Bisacodyl Tablets USP 5MG Film Enteric	10	TB
	✓	Bismuth Subsalicylate Tablets 262 MG	16	TB
	✓	Cetylpyridinium Chlor & Benzocaine Loz	10	LZ
	✓	Diazepam Inj USP 5MG/ML 2ML Syringe/Needle	1-2	EA
✓		Diphenhydramine Hydrochloride Caps 50 MG	2-5	CP
✓		Envelope Drug Dispensing Plastic w/Panel	1-3	EA
✓		Epinephrine Syringe Needle Unit 1:1000	1	EA
	✓	Ibuprofen Tablets USP 800 MG	10-40	TB
	✓	Loperamide Hydrochloride Caps USP 2 MG	2-8	CP
	✓	Magnesia Alumina Hydrox Simethicone Tabs	10-25	TB
	✓	Miconazole Nitrate Antifungal Treatment Kit	1	KT
	✓	Morphine Sulfate Inj USP 10 MG Auto Injector	1-2	EA
	✓	Oxymetazoline Hydrochloride Nasal Solution .05%	1	BT
✓		Pad Isopropyl Alcohol Impreg Nonwoven	1-2	EA
	✓	Polyvinyl Alcohol Ophthalmic Sol Artificial Tears	1	BT
	✓	Pseudoephedrine Hydrochloride Tab USP 60 MG	15	TB
	✓	Tolnaftate Topical Solution USP 1% 10 ML	1	BT

<sup>1</sup> The supplies used for this task vary depending on the Patient Condition.

<sup>2</sup> The amounts cited vary depending on the Patient Condition.

### Task: 744 Apply Velpeau Dressing

Bag	BAS	Nomenclature	Amount	Um
✓		Bandage Muslin Camouflage	1	EA

## APPENDIX A: SUPPLY REQUIREMENTS FOR FIELD MEDICAL TASKS (CONT.)

### Task: Z014 Intubation

Bag	BAS	Nomenclature	Amount	Um
✓		Blade Laryngoscope Macintosh Size 4	1	EA
✓		Blade Laryngoscope Miller Size 3	1	EA
	✓	Depressor Tongue Wood 6 x .75 x .062" Straight	1	EA
✓		Stylet Tracheal Tube Plastic Sterile	1	EA
✓		Syringe Hypodermic GP 10-12 ML Luer Slip	1	EA
✓		Tube Endotracheal Murphy E12 W/Cuff	1	EA
✓		Tube Endotracheal Radiopaque Murphy	1	EA

### Task: Z083 Expose Patient for Exam

Bag	BAS	Nomenclature	Amount	Um
✓		Scissors Bandage 7.25" Angle Blunt Pts CRS	1	EA

### Task: ZZ01 Induce Vomiting

Bag	BAS	Nomenclature	Amount	Um
	✓	Ipecac Syrup 7% 30ML	1	EA
✓		Sponge Surgical Cellulose Cotton Gauze	2	EA

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